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<b>REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL</b>  Address to: MS RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	<b>Application Number</b>	<b>09/936987</b>
	<b>Filing date</b>	<b>03/05/2002</b>
	<b>First Named Inventor</b>	<b>Kramerich</b>
	<b>Art Unit</b>	<b>2144</b>
	<b>Examiner Name</b>	<b>Shaw, Peling Andy</b>
	<b>Attorney Docket Number</b>	<b>14862-323</b>

**This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application.**

Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

**1. Submission required under 37 CFR 1.114**

- a. ☐ Previously submitted
- i. ☐ Consider the amendment(s)/reply under 37 CFR 1.116 previously filed on September 25, 2007.  
(Any unentered amendment(s) referred to above will be entered).
- ii. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on \_\_\_\_.
- b. ☒ Enclosed
- i. ☒ Amendment(s)/Reply
- ii. ☐ Affidavit(s)/Declaration(s)
- iii. ☐ Supplemental Information Disclosure Statement (IDS)
- iv. ☐ Other

**2. Miscellaneous**

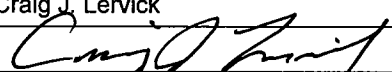
- a. ☐ Suspension of action on the above-identified application is requested under 37 CFR 1.103© for a period of \_\_\_\_ months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(l) required)
- b. ☐ Other \_\_\_\_.

**3. Fees**

The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed.

- a. ☒ The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. 50-1901.
- i. ☒ RCE fee required under 37 CFR 1.17(e).
- ii. ☒ Extension of time fee (37 CFR 1.136 and 1.17).
- iii. ☐ Other \_\_\_\_.
- b. ☐ Check in the amount of \$\_\_\_\_ enclosed.
- c. ☐ Payment by credit card (Form PTO-2038 enclosed)

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.****SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED**

Name (Print/Type)	Craig J. Lervick	Registration No. (Attorney/Agent)	35,244
Signature		Date:	1-31-2008

**CERTIFICATE OF MAILING OR TRANSMISSION**

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: MS RCE, Commissioner For Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below.

Name (Print/Type)		Date:	
Signature			